

CHILD ABUSE AND NEGLECT FATALITIES

CHAPTER OUTLINE DISPROPORTIONALITY

KEY CONCEPTS

African American and American Indian/Alaska Native (AI/AN) children are overrepresented as victims of child abuse and neglect fatalities. These issues of disproportionality and disparity have been discussed and considered by the Commission as it has traveled around the country. There was some level of discussion at several CECANF meetings, as well as a focused discussion on disproportionality at the Commission's New York meeting in August 2015. As the Commissioners heard testimony, these discussions focused on data, assessing risk, and the impact of racism, poverty, and bias.

In putting forward CECANF's National Strategy to reduce child abuse and neglect fatalities, it is critical to include policy and practice recommendations that address the ways in which this issue affects different populations disproportionately.

THEMES AND RELATED RECOMMENDATIONS

Themes

Examples from jurisdictions—While still somewhat early in these efforts, two examples illustrate focused work to address disproportionality related to child abuse and neglect fatalities:

Sacramento County, CA's focused work on addressing child fatalities of African American children was an example of a community working to identify why the problem of disproportionality for child fatalities of African American children persisted for some 21 years without being addressed, and mobilizing a broad range of stakeholders to address the issue. This work illuminates the following:

- Use of data to identify neighborhood-specific considerations to focus the approach and strategies
- Importance of early intervention and prevention efforts to engage parents and community
- Importance of more effective data collection, along with assessment and screening tools that mitigate subjective decision-making

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• Implementation of an increased focus on family development and building the capacity and standards within the workforce to work with families to support where the individual/family is and support and strengthen the family moving to where the individual/family wants/needs to be

Michigan's effort built an accountability and business case for addressing disproportionality and promoting equity as a social justice issue. Bringing a broad group of stakeholders together, demonstration projects were implemented to address disproportionality, with an emphasis on training the workforce, partners, and mandated reporters, and formulating policy and programs that promoted prevention and access to interventions that promote individuals and families becoming strong and resilient.

Implicit bias can impact decision-making related to children being overrepresented and possibly underrepresented in the child welfare system.

- Validated and normed tools, such as Structured Decision Making (SDM) tools, cannot remove all discretionary decision-making, and most have override options.
- Research is needed on how the implicit biases of individuals and those embedded in agency policies and practices affect service delivery. One area of focus for this research might be looking at the impact on white families of how children with head trauma are assessed and how that might lead to an underreporting of child abuse and neglect.

Lead Recommendations, With Examples of Implementation Recommendations (Still need to be developed further)

Aligned with all the components of CECANF's National Strategy, at the federal, state, and local levels:

- 1. Use data to identify the extent of disproportionality and disparity issues in communities, and formulate effective place-based strategies that can be brought to scale to reduce child abuse and neglect fatalities.
 - Promote examples such as the focused effort in Sacramento County, CA, and Michigan, so that other communities might learn from these examples and replicate a data-informed approach to identify the extent of the problem and develop a community-driven response to address the reduction of child abuse and neglect fatalities.
 - Conduct focused research on how implicit biases impact assessment, access to services, and service delivery. "Abusive" head trauma might be an area for a specific study on how white children and nonwhite children are assessed and related services are identified and provided.
- 2. Change the narrative about families disproportionately represented in the child welfare system and in other related child-/family-serving systems to focus on social justice, equitable decision-making, and shared accountability.
 - Train and develop the child welfare workforce, partners, and mandated reporters to:

- Focus on family engagement, development, and strengthening
- Understand the historical context of racism
- Understand and recognize biases and how biases can impact assessment of risk, access to services, and delivery of services
- 3. Address racism, racial equity, and bias in decision-making openly to promote collective responsibility for addressing disproportionality and disparities related to children and families involved in child welfare system.
 - Provide federal and federally connected funding mechanisms and resources that explicitly integrate an expectation that issues of disproportionality and disparities will be analyzed, considered, and addressed in the use of dollars to deploy prevention and intervention services to children and families.
 - Deploy federal and federally connected funding mechanisms and resources to promote innovation in addressing disproportionality and disparities.
 - Promote examples, such as the National Council of Juvenile and Family Court Judges (NCJFCJ) Bench Card, to expose practitioners to decision-making tools that are focused on addressing bias directly.

EXAMPLES

Sacramento County, CA (Chet Hewitt), and Michigan (Dr. Paul Elam) offered some specific examples of targeted change efforts that can be highlighted.

- Sacramento County—particularly the data analysis that looks at the conditions in particular neighborhoods
- Michigan—particularly around focused training becoming institutionalized and being embedded in policy

Emphasize the shared responsibility frame that Dr. Renee Canady emphasized as aligning with the Collective Responsibility for Safety frame of CECANF.

Highlight the emphasis on the importance of data (across speakers)—comprehensive data, data analysis that integrates the context around policies and practices that might be impacted by implicit bias, and research that looks at how implicit bias impacts assessment and service delivery.

QUOTES FROM TESTIMONY

Chet Hewitt: "[Related to Sacramento County's focused work on addressing child fatalities of African American children] the data shows that 80 percent of all African American child fatalities in these categories occurred in just six Sacramento County neighborhoods. The child death review team's [data] was then compared to the data from the Healthy Sacramento Coalition Health Needs' assessments and our 2012 County Health Profile. We found that these six neighborhoods share many of the same risk factors. Compared to Sacramento County as a whole, the six neighborhoods have higher rates for risk for violence, almost twice as high, and at least twice as many of its residents without high school diplomas." (NY mtg transcript, p. 85)

Dr. Rita Cameron Wedding: "[T]he differential standard for neglect and abuse of black and white families can actually push families, black families, further outside the safety net. And that's not what we want. One of the things that does that is a differential response of child welfare. We have oftentimes identical risk factors for black families and white families, but when the risk factors are identical, white families are more likely to get family and home support and black families are more likely to have their children removed." (NY mtg transcript, p. 80)

Dr. Paul Elam: Regarding work in Michigan—"Practitioners have worked for an average of 23 years and never had conversations about multicultural issues, didn't feel comfortable about it, so we had to change the culture." (NY mtg transcript, p. 83)

Dr. Renee Canady: "[S]ee poverty as a condition and not as a character flaw." (NY mtg transcript, p. 90)

Dr. Renee Canady: "...[Recommend] putting [the issue of disproportionality] forth, saying that this Commission recognizes that many of the challenges are based on race; even the science, when you control for poverty, socioeconomic status, there is still a variance that is unexplained, and we believe that it's because of racism." (NY mtg transcript, p. 101)

GAPS/QUESTIONS STILL TO BE ADDRESSED

Engaging the faith-based community (NY mtg transcript, pp. 56 and 98)